

Employee Post-Travel Disclosure of Travel Expenses

Date/Time Stamp:

17 MAR 10 PM 1:47

Post-Travel Filing Instructions: Complete this form within 30 days of returning from travel. Submit all forms to the Office of Public Records in 232 Hart Building.

In compliance with Rule 35.2(a) and (c), I make the following disclosures with respect to travel expenses that have been or will be reimbursed/paid for me. I also certify that I have attached:

- ☒ The **original** *Employee Pre-Travel Authorization* (Form RE-1), **AND**
☒ A **copy** of the *Private Sponsor Travel Certification Form* with all attachments (itinerary, invitee list, etc.)

Private Sponsor(s) (list all): Healthcare Information and Management Systems Society (HIMSS)

Travel date(s): February 19 - February 22, 2017

Name of accompanying family member (if any): _____

Relationship to Traveler: ☐ Spouse ☐ Child

IF THE COST OF LODGING DID NOT INCREASE DUE TO THE ACCOMPANYING SPOUSE OR DEPENDENT CHILD, ONLY INCLUDE LODGING COSTS IN EMPLOYEE EXPENSES. (Attach additional pages if necessary.)

Expenses for Employee:

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
<input type="checkbox"/> Good Faith Estimate	\$392.40	\$348	\$185	
<input checked="" type="checkbox"/> Actual Amount				

Expenses for Accompanying Spouse or Dependent Child (if applicable):

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
<input type="checkbox"/> Good Faith Estimate				
<input type="checkbox"/> Actual Amount				

Provide a description of all meetings and events attended. See Senate Rule 35.2(c)(6). (Attach additional pages if necessary.):

additional page attached

3/3/17
(Date)

Sarah Lloyd Stevenson
(Printed name of traveler)

Sarah Lloyd Stevenson
(Signature of traveler)

TO BE COMPLETED BY SUPERVISING MEMBER/OFFICER:

I have made a determination that the expenses set out above in connections with travel described in the *Employee Pre-Travel Authorization* form, are necessary transportation, lodging, and related expenses as defined in Rule 35.

3/3/17
(Date)

[Signature]
(Signature of Supervising Senator/Officer)

EMPLOYEE PRE-TRAVEL AUTHORIZATION

Date/Time Stamp:

Pre-Travel Filing Instructions: Complete and submit this form at least 30 days prior to the travel departure date to the **Select Committee on Ethics in SH-220**. Incomplete and late travel submissions will not be considered or approved. This form must be typed and is available as a fillable PDF on the Committee's website at ethics.senate.gov. Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

Name of Traveler: Sarah Lloyd Stevenson

Employing Office/Committee: Office of Senator Roger Wicker

Private Sponsor(s) (list all): Healthcare Information and Management Systems Society (HIMSS)

Travel date(s): 2/20/2017-2/23/2017

Note: If you plan to extend the trip for any reason you must notify the Committee.

Destination(s): Orlando, FL

Explain how this trip is specifically connected to the traveler's official or representational duties:

I handle health policy for Senator Roger Wicker, who is very interested in reforms to telehealth and health technology. This conference will focus on the many innovations and needed federal policy changes in these specific health-care areas. I look forward to discussing important policies like Sen. Wicker and Schatz's CONNECT for Health Act with the stakeholders who will be at the conference. This conference is a great opportunity to represent Senator Wicker while meeting with representatives from the medical and technology fields. We will specifically discuss how the federal government can support medical innovation, access to technology, and reimbursement through Medicare.

Name of accompanying family member (if any): _____

Relationship to Employee: ☐ Spouse ☐ Child

I certify that the information contained in this form is true, complete and correct to the best of my knowledge:

1/17/17
(Date)

Sarah Lloyd Stevenson
(Signature of Employee)

TO BE COMPLETED BY SUPERVISING SENATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, Secretary for the Majority, Secretary for the Minority, and Chaplain):

I, Senator Roger F. Wicker hereby authorize Sarah Lloyd Stevenson
(Print Senator's/Officer's Name) (Print Traveler's Name)

an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain.

I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate. (signify "yes" by checking box) ☐

1/17/17
(Date)

Roger Wicker
(Signature of Supervising Senator/Officer)

PRIVATE SPONSOR TRAVEL CERTIFICATION FORM

This form must be completed by any private entity offering to provide travel or reimbursement for travel to Senate Members, officers, or employees (Senate Rule 35, clause 2). Each sponsor of a fact-finding trip must sign the completed form. The trip sponsor(s) must provide a copy of the completed form to each invited Senate traveler, who will then forward it to the Ethics Committee with any other required materials. The trip sponsor(s) should **NOT** submit the form directly to the Ethics Committee. Please consult the accompanying instructions for more detailed definitions and other key information.

The Senate Member, officer, or employee **MUST** also provide a copy of this form, along with the appropriate travel authorization and reimbursement form, to the Office of Public Records (OPR), Room 232 of the Hart Building, within thirty (30) days after the travel is completed.

1. Sponsor(s) of the trip (please list all sponsors):
Healthcare Information and Management Systems Society (HIMSS)
2. Description of the trip: Educational experience to attends HIMSS' Annual Conference and Exhibition
3. Dates of travel: February 20 - 23, 2017
4. Place of travel: Orlando, Florida
5. Name and title of Senate invitees: Please see attached list of Senate invitees
6. I *certify* that the trip fits one of the following categories:
☒ (A) The sponsor(s) are not registered lobbyists or agents of a foreign principal and do not retain or employ registered lobbyists or agents of a foreign principal and no lobbyist or agents of a foreign principal will accompany the Member, officer, or employee *at any point* throughout the trip.
- OR -
☐ (B) The sponsor or sponsors are not registered lobbyists or agents of a foreign principal, but retain or employ one or more registered lobbyists or agents of a foreign principal and the trip meets the requirements of Senate Rule 35.2(a)(2)(A)(i) or (ii) (*see question 9*).
7. ☒ I *certify* that the trip will not be financed in any part by a registered lobbyist or agent of a foreign principal.
- AND -
☒ I *certify* that the sponsor or sponsors will not accept funds or in-kind contributions earmarked directly or indirectly for the purpose of financing this specific trip from a registered lobbyist or agent of a foreign principal or from a private entity that retains or employs one or more registered lobbyists or agents of a foreign principal.
8. I *certify* that:
☒ The trip will not in any part be planned, organized, requested, or arranged by a registered lobbyist or agent of a foreign principal except for *de minimis* lobbyist involvement.
- AND -
☒ The traveler will not be accompanied on the trip by a registered lobbyist or agent of a foreign principal except as provided for by Committee regulations relating to lobbyist accompaniment (*see question 9*).

9. **USE ONLY IF YOU CHECKED QUESTION 6(B)**

I *certify* that if the sponsor or sponsors retain or employ one or more registered lobbyists or agents of a foreign principal, one of the following scenarios applies:

☐ (A) The trip is for attendance or participation in a one-day event (exclusive of travel time and one overnight stay) and no registered lobbyists or agents of a foreign principal will accompany the Member, officer, or employee *on any segment* of the trip.

– OR –

☐ (B) The trip is for attendance or participation in a one-day event (exclusive of travel time and two overnight stays) and no registered lobbyists or agents of a foreign principal will accompany the Member, officer, or employee *on any segment* of the trip (*see questions 6 and 10*).

– OR –

☐ (C) The trip is being sponsored only by an organization or organizations designated under § 501(c)(3) of the Internal Revenue Code of 1986 and no registered lobbyists or agents of a foreign principal will accompany the Member, officer, or employee *at any point* throughout the trip.

10. **USE ONLY IF YOU CHECKED QUESTION 9(B)**

If the trip includes two overnight stays, please explain why the second night is practically required for Senate invitees to participate in the travel:

11. ☒ An itinerary for the trip is attached to this form. I *certify* that the attached itinerary is a detailed (hour-by-hour), complete, and final itinerary for the trip.

12. Briefly describe the role of each sponsor in organizing and conducting the trip:

HIMSS develops, organizes, and conducts all aspects of the trip and conference. HIMSS17 is the largest healthcare sector conference, bringing together thought leaders from the healthcare community, including providers, medical informaticists, IT experts, vendors, and federal and state government representatives.

13. Briefly describe the stated mission of each sponsor and how the purpose of the trip relates to that mission:

HIMSS is a cause-based, not-for-profit organization focused on better health through IT. HIMSS leads efforts to optimize healthcare engagements and outcomes using IT, providing thought leadership, education and market research. HIMSS represents 64,000 members, 640 corporate members and 450 non profits.

14. Briefly describe each sponsor's prior history of sponsoring congressional trips:

HIMSS holds its Annual Conference every year, and invites congressional staff, as well as federal, state, and local policymakers and government officials, for this unique learning experience.

15. Briefly describe the educational activities performed by each sponsor (other than sponsoring congressional trips):

HIMSS hosts educational briefings and roundtables with federal and state officials, and health IT experts, covering relevant policy issues. HIMSS engages in various educational events, including our interoperability showcase, which demonstrates the latest technology and interoperability advancements.

16. Total Expenses for Each Participant:

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses
<input checked="" type="checkbox"/> Good Faith estimate	\$350	\$375	\$185	
<input type="checkbox"/> Actual Amounts				

17. State whether a) the trip involves an event that is arranged or organized *without regard* to congressional participation or b) the trip involves an event that is arranged or organized *specifically with regard* to congressional participation:

The event was organized without regard to congressional participation

18. Reason for selecting the location of the event or trip

HIMSS Annual Conference includes over 40,000 participants, and rotates annual among the few cities that can accommodate a conference of this size.

19. Name and location of hotel or other lodging facility:

Rosen Centre, Orlando, FL

20. Reason(s) for selecting hotel or other lodging facility:

HIMSS seeks bids and negotiates with hotels adjacent to the convention center where the conference is held. We choose based on consideration of price, location, accessibility to the conference, and availability of rooms to accommodate congressional staff.

21. Describe how the daily expenses for lodging, meals, and other expenses provided to trip participants compares to the maximum per diem rates for official Federal Government travel:

Lodging rate is slightly lower than per diem and the meal expenses are comparable. However this event is organized without regard to congressional participation and the hotel is selected for reasons listed in question 20.

22. Describe the type and class of transportation being provided. Indicate whether coach, business-class or first class transportation will be provided. If first-class fare is being provided, please explain why first-class travel is necessary:

Coach air transportation will be provided.

23. ☒ I represent that the travel expenses that will be paid for or reimbursed to Senate invitees do not include expenditures for recreational activities, alcohol, or entertainment (other than entertainment provided to all attendees as an integral part of the event, as permissible under Senate Rule 35).

24. List any entertainment that will be provided to, paid for, or reimbursed to Senate invitees and explain why the entertainment is an integral part of the event:

None provided.

25. I hereby *certify* that the information contained herein is true, complete and correct. (You must include the completed signature block below for each travel sponsor.):

Signature of Travel Sponsor: Carla Smith

Name and Title: Carla Smith, Executive Vice President

Name of Organization: HIMSS

Address: 33 West Monroe Street, Suite 1700, Chicago, IL 60603-5616

Telephone Number: 734-604-6275

Fax Number: _____

E-mail Address: csmith@himss.org

U.S. Senate Invitees:

- Stacy Amin (Senate HELP Committee)
Lauren Arias (Sen. Udall)
- Brett Baker (Senate Finance Committee)
- Jordan Bartolomeo (Sen. Isakson)
- Morgan Brand (Sen. Schumer)
- Jennifer DeAngelis (Sen. Whitehouse)
- Eric Dempsey (Senate Finance Committee)
- Will Dent (Sen. Isakson)
- Marvin Figueroa (Sen. Warner)
- Ken Flanz (Sen. Crapo)
- Colin Goldfinch (Senate HELP Committee)
- Aimee Grace (Sen. Schatz)
- Elizabeth Henry (Sen. Cochran)
Virginia Heppner (Senate HELP Committee)
- Lauren Jee (Sen. Cardin)
- Elizabeth Henry (Sen. Cochran)
- Adam Lachman (Sen. King)
- Kathleen Laird (Sen. Baldwin)
Jane Lucas (Sen. Thune)
- Greg Mathis (Sen. Peters)
- Bobby McMillin (Senate HELP Committee)
- Brett Meeks (Senate HELP Committee)
- Patrick O'Neil (Sen. King)
- Madeleine Pannell (Senate HELP Committee)
Stuart Portman (Sen. Hatch)
- Laurel Sakai (Sen. Blumenthal)
- Kripa Sreepada (Fellow with Senate Finance Committee)
- Sarah Smith (Sen. Klobuchar)
- Sarah Lloyd Stevenson (Sen. Wicker)
- Kara Townsend (Senate HELP Committee)
- Beth Vrabel (Senate Finance Committee)
- Beth Wikler (Sen. Franken)



All times are Eastern Time (EST).

10:56pm - Arrive in Orlando (Jet Blue 2323)

(When not attending concurrent educational sessions or for non-scheduled time)	<p>Description: Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data. Learn how current health IT products in the market deliver standards-based interoperability and health information exchange with an interactive learning experience.</p>
10:00 – 11:00 AM	<p>Concurrent Education Sessions:</p> <p>Location: Orange County Convention Center</p> <p>Improving Clinician Mobility for Patient Care Delivery Clinicians are interested in the efficacy of using mobile devices. This presentation discusses findings from a pilot study aimed at achieving greater mobile flexibility and productivity in patient care. The innovation that was tested was an integrated set of wireless computing and docking technologies that automatically connects a mobile tablet computer to a mobile base station and other computer peripherals without the use of cables. We report on the benefits and challenges of the vendor agnostic solution framework, implementation process, and utilization for patient care.</p> <p>OR</p> <p>Importance of Narrative: Open Notes, Patient Stories, Human Connection This session will highlight the importance of preserving narrative and patient stories within the clinical encounter using a combination of stories, examples, and research to showcase how story amplifies the connection between patients and clinicians and improves care . We 'll also examine the way that open notes impacts patients' perspective on their illness and their likelihood to take action around their health.</p> <p>OR</p> <p>Overcome Challenges/Obstacles to Achieving Interoperability Interoperability is getting due attention after most hospitals and providers achieved significant progress in meaningfully using EHR by coordinate care within and between care settings. The next step is to electronically communicate with providers delivering care for transient and local population at sub-acute, long-term care, home care, medical home and hospice environments across the continuum of care. This lecture covers the definitions, factors leading to selecting this topic, approaches used, desired vs. actual state outcomes and gaps, and formal structures (i.e. HIEs). It then expands to implementation steps, challenges from vendors, providers and patients and ways to overcome barriers, critical success factors, conclusions and outcomes, and recommendations to get the benefits of interoperability with an example.</p>
11:00 - 12:00 AM	<p>Staff Led VIP Tour of the Interoperability Showcase</p> <p>Location: Booth 9000 Hall F</p>
11:30 AM – 12:30 PM	<p>Concurrent Education Sessions:</p> <p>Location: Orange County Convention Center</p> <p>It Starts with an Idea: Making Innovation Happen What do you do with an idea? In your organization, a lot is riding on that question.</p>

(When not attending concurrent educational sessions or for non-scheduled time)	<p>Description: Explore a health ecosystem where standards-based health IT enables individuals to securely access, contribute to and analyze their own health data. Learn how current health IT products in the market deliver standards-based interoperability and health information exchange with an interactive learning experience.</p>
10:00 – 11:00AM	<p>Concurrent Education Sessions:</p> <p>Location: Orange County Convention Center</p> <p>Efforts to Assist Providers and Patients In Using Health IT for High Quality Care The concept of using health IT to provide high quality care has transitioned from vision to reality over the last few years. For nearly a decade, Office of the National Coordinator for Health Information Technology (ONC) has been working with consumer representatives, providers, and other stakeholders across the country to develop tools and resources that support their use of certified health IT to improve how care is being delivered. This session will outline ONC's tools and resources available to help providers and patients in the care delivery process, with a special focus on population & community health, workforce training, interoperability, consumer engagement, and practice transformation.</p> <p>OR</p> <p>No Patient Left Behind: Leading Transition to Modernized Capability Modernizing clinical capability and systems while meeting the current demands is a complicated process with patient safety and medical readiness risks. This session will describe the MHS approach to transitioning legacy applications to modernize systems. It will then go into the efforts and accomplishments of the transition to date and describe enterprise planning and the risks to patients. The session will end on how the health IT industry and the commercial world may apply approaches and lessons learned.</p> <p>OR</p> <p>Next-Generation IT Governance: Fully Integrated and Operationally-Led The increasingly complex nature of today's healthcare environment makes effective governance more essential than ever. Challenges raised by issues such as the extension of IT systems to community partners and increased rates of mergers and acquisitions have rendered traditional approaches to IT governance disconnected and inoperative. IS-led IT governance, still the norm in most organizations, only frustrates efforts to link committees, coordinate responsibilities and properly distribute authorities. The solution to those challenges is a holistic approach to IT governance that allows for optimization of systems and resources to ultimately improve healthcare outcomes.</p> <p>Leveraging Technology for Financial Patient Engagement Patient payment and collection practices are highly complex, and with high deductibles, patients have evolved into a primary payer source. On average, healthcare consumers are now responsible for 30% to 35% of their healthcare bill, and collection costs are significantly higher for patients as compared to payer collection. Traditional billing practices are obsolete, require analytics, and now have significant downstream debt risk. It is increasingly important to leverage predictive analytics for patient-centered financial discussions throughout the continuum of the Revenue Cycle.</p>
11:30 AM –	<p>Concurrent Education Sessions:</p>

Healthcare Consumerism: Understand the Person Behind the Patient
Consumers are demanding an unprecedented level of personalization in every facet of their lives. This increasing demand challenges healthcare companies to think of patients as consumers, to see the person behind the patient. This session will discuss how to leverage insights and preferences to tailor the patient experience at every touchpoint. Organizations will share how they invested in cloud, mobile, social technology to transform engagement and empower patients to take a more active role in their care.

The CIO/CMO Relationship: Keys to Leading and Thriving During Changing Times

OR

This session presents the results from a statewide collaboration between the Virginia Chapter of HIMSS and the four state Project Management Institute (PMI) chapters undertaken in 2015 to develop and field a cross-training program for health IT project managers and healthcare practitioners.

Concurrent Education Sessions:

RPM: Is It All It Is Cracked Up to Be?

OR

This is a videotaped rebroadcast session. Value-based care initiatives are more important than ever before. Learn the latest insights from a variety of federal government agencies.

IT-Enabling Population Health: A Journey, Not a Destination

Providence Health & Services (PH&S) created the Population Health (PH) division in recognition of the growing percentage of its revenue tied to at-risk contracts for defined populations of patients. Within the PH division, the Office of

	<p>Population Health Informatics (OPHI) was created to manage population health data coordination, quality measurement, advanced analytics, predictive modeling and IT collaboration. The OPHI also optimizes the ability of Providence's HIT applications to support population health management.</p> <p>OR</p> <p>YourTurn: Cybersecurity Challenges in Health Care Evolving cyber threats are requiring operations and security staff to rapidly adapt and respond. One way for a hospital to improve its response agility is by implementing cyber threat intelligence (CTI) information sharing programs. These programs rely on a network of other organizations with similar profiles to share data to better understand malicious actors. The talk, led by the NCCoE at the NIST, will explore best practices and guidelines.</p>
2:30 – 4:00 PM	<p>Roundtable Discussion with Federal Agency Staff (CMS, ONC, DHA, among others)</p> <p>Location: TBD</p>
4:00 – 5:00 PM	<p>Concurrent Education Sessions: <u>Location:</u> Orange County Convention Center</p> <p>Pursuing Unlimited Mobile Opportunities with Bounded Resources The use of smartphones, tablets, wireless medical devices, mobile apps, etc., in healthcare is becoming pervasive. With so much opportunity, where does an organization begin? This presentation will look at the efforts of JFK Health System, based in NJ, which is taking a structured approach to get its arms around the mobile space.</p> <p>OR</p> <p>Portal Use Factors - The Keys to Patient Portal Adoption There is a premise that patient portals facilitate increased patient engagement. However, despite federal initiatives to promote the provision and use of patient portals, their overall adoption and use have been less than desired. Studies have identified various factors that affect patient portal adoption and use. This session will examine such specific factors and, through active audience participation, seek to identify practical interventions targeted at improving the use of patient portals.</p> <p>OR</p> <p>State Medicaid Agency Interoperability States' IT systems are critical for successful operation of Medicaid, the nation's largest public health insurance program. Increasingly, modular and interoperable Medicaid IT systems are becoming vital for promoting health outcomes of Medicaid beneficiaries and for reducing Medicaid program costs. While CMS, ONC and other federal agencies have issued guidance for interoperability in Medicaid, there still exists great opportunities for enhancements that are critical to achieving a true national, interoperable Medicaid. This session will discuss the critical areas of interoperability, how further guidance from HHS agencies can accelerate Medicaid Interoperability by states and how health information exchanges (HIEs) can be leveraged.</p>
5:00 – 6:00 PM	<p>Education Social Hour</p> <p><u>Location:</u> Lobbies A/B, E/F</p>

	Description: A social hour to meet the education session speakers "up close and personal" and network with fellow colleagues
	Dinner on your own

Thursday, February 23, 2017

8:30 – 10:00 AM	<p>Morning Keynote: <i>Political Perspectives on America's Future</i> Featuring Speaker John Boehner</p> <p><u>Location:</u> Valencia Ballroom</p>
10:30 – 11:30 AM	<p>Concurrent Education Sessions:</p> <p><u>Location:</u> Orange County Convention Center</p> <p>Interoperability Matters: Impact on Mammography Outcomes While CIOs often hear about how better health data interoperability will improve outcomes and overall quality of care, the benefits are often stated as vague theoretical. A use case for interoperability directly improving care quality lies in mammography--cloud-based mammogram image exchange networks provide secure, patient-portable accessibility of prior exams for more accurate interpretation of exams and improved patient outcomes at reduced costs. With increased availability of prior exams, which are essential for accurate interpretation of new mammograms because each patient's breast tissue is unique, quality of patient care and outcomes are improved, along with patient satisfaction. This interactive, educational session will share an interoperability use case in mammography, discuss how this model can be applied to other imaging-intensive specialties and how to develop enterprise-friendly medical image-sharing implementations that will pay dividends for patient outcomes.</p> <p>OR</p> <p>Round Peg, Square Hole: Old Regulations Meet New Technology Despite the government's repeated statements that it encourages technological innovation in the healthcare space, the application of old rules and regulations to new technology continues to stifle advancement in the field of healthcare IT and cause grave concerns for healthcare providers and healthcare IT entrepreneurs alike. This presentation will provide background related to the major statutes and regulations governing healthcare ventures, including the Stark law and the Anti-Kickback Statute, and discuss how those statutes and regulations have been applied in the healthcare IT space. The presentation will also provide practical advice on what to look for and what not to do to avoid government scrutiny.</p> <p>OR</p> <p>Smart Alerts in Healthcare: Real as Never Before In recent years, alarm hazards (e.g., excessive alarms, missed alarms, delayed alarms, etc.) was ranked as the #1 health technology hazard by the ECRI (Emergency Care Research Institute). EHR provides an unprecedented opportunity to use syndrome surveillance technology for the development of "smart alarms". This session will address "Failure to rescue" concept in clinical diagnostic alerts and also will outline the problem of information overload from unnecessary multiple clinical alerts while presenting some key potential steps to address this issue.</p> <p>OR</p>



**33 West Monroe St, Suite 1700
Chicago, IL 60603-5616
Tel 312 664 4467
Fax 312 664 6143
www.himss.org**

December 22, 2016

**Ms. Sarah Lloyd Stevenson
Office of Senator Roger Wicker
555 Hart Senate Office Building
Washington, DC 20510**

Dear Ms. Stevenson:

I am pleased to extend this invitation for you to attend the **2017 Healthcare Information and Management Systems Society (HIMSS) Annual Conference and Exhibition** in Orlando, Florida, **February 19 – 22 (or February 20 - 23), 2017**. This unique opportunity will allow you to learn about the potential and the challenges of healthcare information technology—including electronic health records, health information exchange, and mobile health—to help transform healthcare in America.

HIMSS is a global, cause-based, not-for-profit organization focused on transforming health through information technology (IT), providing health IT thought leadership, education, events, market research, and media services around the world. Founded in 1961, HIMSS represents more than 64,000 individuals, plus over 640 corporations and 450 non-profit partner organizations, that share this cause. HIMSS, headquartered in Chicago, serves the global health IT community with additional offices in the United States, Europe, the Middle East, and Asia. To learn more about HIMSS, please visit our website at www.himss.org.

The HIMSS Annual Conference and Exhibition is one of the healthcare sector's largest conferences. The 2017 HIMSS Annual Conference is anticipated to include over 300 educational events, 1,200 exhibitors, and over 45,000 attendees from the U.S. and around the world. Attendees include hospital executives, physicians, physician group practice managers, nurses and other healthcare providers, federal and state agency staff, public health agency personnel, state and local government representatives as well as technology vendors and consultants. To learn more about HIMSS16 and view a detailed conference brochure please visit www.himssconference.org.

During the conference, you may be especially interested in participating in a range of health IT policy events and discussions, including the HIMSS Interoperability Showcase, Cybersecurity Command Center, Connected Health Experience, Disaster Preparedness Knowledge Center, Federal Health IT Solutions Pavilion, and many other educational opportunities.

For the last ten years HIMSS has offered paid educational opportunities to selected policy makers to attend the HIMSS Annual Conference to learn about the public policy issues and challenges of the system-wide adoption of health information technology. Consistent with Senate and House of Representatives Ethics Rules, HIMSS is extending to you an invitation to





**33 West Monroe St, Suite 1700
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Upon your acceptance of this invitation, we will provide the necessary documents to submit with **your request for approval of privately sponsored travel to the Senate Select Committee on Ethics or House Committee on Ethics, as applicable. Requests must be submitted at least 30 days prior to travel (no later than January 19, 2017).** HIMSS will also provide instructions to book your travel in compliance with the travel rules once approval has been obtained.

Paid opportunities to attend this unique educational event are limited, so if you will be able to attend please R.S.V.P. no later than January 6, 2017 to allow enough time for you to submit your request to your Ethics Committee at least 30 days prior to travel. Those responding will be accommodated on a first-come, first-serve basis.

If you have any questions, please feel free to contact me or David Gray at dgray@himss.org or

Sincerely,

Samantha Burch
Senior Director, Congressional Affairs,
Healthcare Information and Management Systems Society
4300 Wilson Boulevard, Suite 250
Arlington, VA 22203-4168
Phone: 703.562.8847;
E-mail: sbburch@himss.org

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